

**OFFICIAL FILE**  
**ILLINOIS COMMERCE COMMISSION FORMAL COMPLAINT**

Illinois Commerce Commission  
527 E. Capitol Avenue  
Springfield, Illinois 62701

For Commission Use Only:  
Case: 05-0628

**ORIGINAL**

Regarding a complaint by (Person making the complaint): MICHAEL ROBIALICO  
Against (Utility name): ILLINOIS AMERICAN WATER CO.  
As to (Reason for complaint) JULY WATER BILL OF 421.17. NEW METER  
INSTALLED IN JUNE. COMPANY CLAIMS THEY DID  
OVERCHARGE ME, BUT BILL FOR OUR MONTH IS  
STILL 325.11  
in HOMER GLEN Illinois.

**TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:**

My mailing address is 14358 SO HEATHER LANE - HOMER GLEN  
The service address that I am complaining about is 14358 SO HEATHER LN. HOMER GLEN  
My home telephone is (708) 301-2737  
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (708) 301-2737  
(Full name of utility company) ILLINOIS AMERICAN WATER (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

83 IL ADM PART 280 SO (A) 280 701 (A)

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

Has your complaint filed with that office been closed?

ILLINOIS  
COMMERCE COMMISSION  
2005 SEP 29 11:10  
CHIEF CLERK'S OFFICE  
☒ Yes ☐ No  
☒ Yes ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

JUNE WATER BILL 105.36 - NEW METER

INSTALLED 6-3-05-

JULY WATER BILL- 421.17 ????

AUGUST WATER BILL 169.95- IF THERE WAS  
A PROBLEM WITH METER- WHY SHOULD I

Please clearly state what you want the Commission to do in this case:

PAY FOR IT.

AVERAGE OUT JULY WATER BILL-

Date: 9-28-05  
(Month, day, year)

Complainant's Signature Michael Rukmalho

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

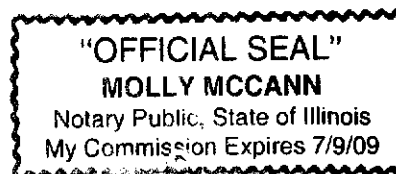
A notary public must witness the completion of this part of the form.

I, MICHAEL KOBIALEK, first being duly sworn, say that I have read the above petition and know what it says.  
The contents of this petition are true to the best of my knowledge.

(Signature) Michael Rukmalho

Subscribed and sworn/affirmed to before me on (month, day, year) 9-28-05

Molly McCann  
Notary Public, Illinois



**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.